## Case 16-13424 Doc 1 Filed 04/20/16 Entered 04/20/16 12:21:00 Desc Main Document Page 1 of 62

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Marcia First name  Ann Middle name  Rockett Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Marcia Rockett	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4056	

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Case number (if known)

Debtor 1 Marcia Ann Rockett

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 2714 Hebron Ave Apt D Zion, IL 60099 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Lake County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Marcia Ann Rockett

Par	t 2: Tell the Court About	Your B	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required b</i> f page 1 and check the appropr	y 11 U.S.C. § 342(b) for Individuals Filing for Bank ate box.	ruptcy	
	choosing to file under	Chapter 7						
		□ с	hapter 11					
		□ с	hapter 12					
		□ с	hapter 13					
3.	How you will pay the fee		about how yo	u may pay. Туր attorney is sub	pically, if you are paying the fee	eck with the clerk's office in your local court for more yourself, you may pay with cash, cashier's check, cashier's check, cashier's check, cashier's card or check, your attorney may pay with a credit card or check.	or money	
					tallments. If you choose this op ts (Official Form 103A).	tion, sign and attach the Application for Individuals	s to Pay	
I request that my fee be waived (You may request this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than applies to your family size and you are unable to pay the fee in installments). If you che						your income is less than 150% of the official povert	ty line that	
						fficial Form 103B) and file it with your petition.	ot iiii out	
9.	Have you filed for bankruptcy within the	■ No						
	last 8 years?	☐ Ye	s.					
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No	)					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	es.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	□No	Go to l	ine 12.				
	redidence :	■ Ye	es. Has yo	ur landlord obta	ained an eviction judgment agai	nst you and do you want to stay in your residence?	?	
				No. Go to line	12.			
				Yes. Fill out Inbankruptcy pe		n Judgment Against You (Form 101A) and file it wit	th this	

Debtor 1 Marcia Ann Rockett Document Page 4 of 62 Case number (if known)

ar	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of bus	siness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	Number, Street, City, State & ZIP Code				
	it to this petition.		Check	the appropriate bo	ox to describe your business:			
				Health Care Business (as defined in 11 U.S.C. § 101(27A))				
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))				
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))			
				None of the above	e			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate is. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ins, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure S.C. 1116(1)(B).					
	For a definition of small	No.	I am n	ot filing under Char	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	he hazard?				
	public health or safety? Or do you own any							
	property that needs immediate attention?			iate attention is why is it needed?				
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is	the property?				
					Number, Street, City, State & Zip Code			

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Debtor 1 Marcia Ann Rockett

Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deh	tor 1 Marcia Ann Rocke		Doc 1 Filed 04/2 Docum	ent Page 6 of 62	Se number (if known)	Desc Main
					or trainiber (ii known)	
Part	6: Answer These Quest	ions for R				
16.	What kind of debts do you have?	16a.	Are your debts primarily of individual primarily for a pe		J.S.C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.		<b>business debts?</b> Business debts a vestment or through the operation of		
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you	owe that are not consumer debts o	r business debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.		. Do you estimate that after any exe available to distribute to unsecured o		luded and administrative expenses
	administrative expenses		■ No			
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes			
18.	How many Creditors do	1-49		<b>1</b> ,000-5,000	□ 25	5,001-50,000
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		0,001-100,000
		☐ 100-1 ☐ 200-9		☐ 10,001-25,000	⊔м	lore than100,000
19.	How much do you	<b>■</b> \$0 - \$	\$50.000	□ \$1,000,001 - \$10 million	n 🗆 \$9	500,000,001 - \$1 billion
	estimate your assets to be worth?	<b>□</b> \$50,0	001 - \$100,000	□ \$10,000,001 - \$50 milli		1,000,000,001 - \$10 billion
			,001 - \$500,000 ,001 - \$1 million	□ \$50,000,001 - \$100 mill □ \$100,000,001 - \$500 mi		10,000,000,001 - \$50 billion fore than \$50 billion
20.	How much do you	<b>\$0 - 9</b>	\$50.000	☐ \$1,000,001 - \$10 millior	n 🗆 \$9	500,000,001 - \$1 billion
	estimate your liabilities to be?	□ \$50,	001 - \$100,000	□ \$10,000,001 - \$50 milli		\$1,000,000,001 - \$10 billion
			,001 - \$500,000 ,001 - \$1 million	□ \$50,000,001 - \$100 mill □ \$100,000,001 - \$500 mi		610,000,000,001 - \$50 billion More than \$50 billion
Part	:7: Sign Below					
For	you	I have ex	xamined this petition, and I de	eclare under penalty of perjury that	the information prov	vided is true and correct.
				7, I am aware that I may proceed, is relief available under each chapter		
				d not pay or agree to pay someone with the notice required by 11 U.S.C. § 3		ey to help me fill out this
		I reques	t relief in accordance with the	e chapter of title 11, United States C	ode, specified in this	s petition.
		bankrup and 357	tcy case can result in fines up	nt, concealing property, or obtaining p to \$250,000, or imprisonment for u		
		Marcia	Ann Rockett re of Debtor 1	Signature	of Debtor 2	

Executed on

MM / DD / YYYY

Executed on April 20, 2016 MM / DD / YYYY

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Debtor 1 Marcia Ann Rockett Page 7 01 02

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Robert	Tomei	Date	April 20, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Robert To	mei		
Printed name			
Tomei Law	ı		
Firm name			
223 N Milw	aukee Ave., Ste. 14		
Gurnee, IL	60031		
Number, Street,	City, State & ZIP Code		
Contact phone	847-596-7494	Email address	robert@tomeilawfirm.com
6310339			
Bar number & St	ate		

		DOCUITI	201 Page 8 01 67	
Fill in this infor	mation to identify your	case:		
Debtor 1	Marcia Ann Rock	ett		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t1: Summarize Your Assets		
		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,757.67
	1c. Copy line 63, Total of all property on Schedule A/B	\$	9,757.67
Par	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	10,581.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2,494.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	17,906.92
	Your total liabilities	\$	30,981.92
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,327.78
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,004.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Case number (if known) Debtor 1 Marcia Ann Rockett

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,327.75 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Port A or Oaks data E/E assertly fallowing	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,494.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	2,494.00

			Document	Page 10 of 62		
Fill in	this info	rmation to identify your	case and this filing:			
Debtor	· 1	Marcia Ann Rock	cett			
Dobto	•	First Name	Middle Name	Last Name		
Debtor						
(Spouse,	if filing)	First Name	Middle Name	Last Name		
United	States E	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	LINOIS		
l _						
Case n	number			_		☐ Check if this is an
						amended filing
Offic	ial F	orm 106A/B				
Sch	Adu	le A/B: Prop	ortv			40/45
						12/15
think it f informat Answer	its best. tion. If mo every que	Be as complete and accura ore space is needed, attach estion.	te items. List an asset only once. If ate as possible. If two married people a separate sheet to this form. On the least of the Post Fortage Nov.	ple are filing together, both ar the top of any additional page	e equally responsible for	supplying correct
Part 1:	Describ	e Each Residence, Building	g, Land, or Other Real Estate You C	Own or Have an Interest In		
1. <b>Do y</b> o	ou own o	r have any legal or equitable	e interest in any residence, buildin	g, land, or similar property?		
■ Nr	o. Go to Pa	art 2				
_		e is the property?				
	os. Where	s is the property:				
Part 2:	Describ	e Your Vehicles				
□ No	0	trucks, tractors, sport u	tility vehicles, motorcycles			
3.1	Make:	Dodge	Who has an interest in	the property? Check one		I claims or exemptions. Put
	Model:	Caliber	Debtor 1 only	and property: Official office		ured claims on Schedule D: Claims Secured by Property.
	Year:	2010	Debtor 2 only			
			,000 Debtor 1 and Debtor 2	2 only	Current value of the entire property?	Current value of the portion you own?
	Other info	ormation:	☐ At least one of the de	•		
	Averag	e condition	_		<b>AF 470 00</b>	фг 470 00
			(see instructions)	munity property	\$5,473.00	\$5,473.00
Exam  No Ye  S Addo pag	nples: Bo o es d the dol ges you l	pats, trailers, motors, personals, trailers, personals, trailers, motors, personals, trailers, personals, trailers, personals, trailers, personals, trailers, personals, person	TVs and other recreational velonal watercraft, fishing vessels, so you own for all of your entries. Write that number here	snowmobiles, motorcycle ac	ccessories	\$5,473.00  Current value of the
						portion you own? Do not deduct secured

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Schedule A/B: Property Official Form 106A/B

	Case 16-13424	Doc 1	Filed 04/20/16 Document	Entered 04/20/16 12:2	21:00 Desc Main
Debtor 1	Marcia Ann Rockett	2		Page 11 of 62 Case number	(if known)
Yes.	Describe				
		n, loveseat, s - good condi		ble, beds, dressers, kitchen	\$2,000.00
	Applia	ances - micro	owave, washer, drye	er	\$200.00
□ No				oment; computers, printers, scanners	s; music collections; electronic devices
	3 telev condit		desktop PC compute	er (old), DVD player - average	\$500.00
Example No	ibles of value les: Antiques and figurines other collections, men Describe			oks, pictures, or other art objects; sta	amp, coin, or baseball card collections;
Exampl	nent for sports and hobbi les: Sports, photographic, musical instruments		other hobby equipment;	bicycles, pool tables, golf clubs, skis	s; canoes and kayaks; carpentry tools;
■ No	<b>ms</b> ples: Pistols, rifles, shotgui Describe	ns, ammunitior	n, and related equipment	t	
□ No	es ples: Everyday clothes, fur Describe	s, leather coat	ts, designer wear, shoes,	accessories	
	Variou minor		f wearing apparel fo	r one adult female, and one	\$500.00
■ No		stume jewelry,	engagement rings, wed	ding rings, heirloom jewelry, watche	s, gems, gold, silver
<i>Exam</i> ■ No	arm animals ples: Dogs, cats, birds, hor Describe	rses			
■ No	ther personal and housel		u did not already list, iı	ncluding any health aids you did r	not list
	the dollar value of all of y art 3. Write that number			ny entries for pages you have atta	\$3,200.00

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Debtor 1 Marcia Ann Rockett Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... 17.1. Credit Union \$0.00 **Checking Account: Great Lakes Credit Union** 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: Yes. ..... **Security Deposit: Security Deposit Held By** \$300.00 **Landlord Hebron Townhose Apts** 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

Official Form 106A/B Schedule A/B: Property page 3

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

■ No

☐ Yes.....

Debtor 1	Marcia Ann Rockett	Document	Page 13 of 62 Case number (if kn)	own)
25. Trusts		erty (other than anythir	ng listed in line 1), and rights or powers	s exercisable for your benefit
■ No				
	Give specific information about them			
	s, copyrights, trademarks, trade secre ples: Internet domain names, websites, p	,		
	Give specific information about them			
_Exam <sub> </sub>	ses, franchises, and other general intal poles: Building permits, exclusive licenses		n holdings, liquor licenses, professional li	censes
■ No □ Yes.	Give specific information about them			
Money or	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. <b>Tax re</b>	funds owed to you			·
■ No	Observation of the later was the sale to t	all all a second and a second all a	and Clark the material and the transfer	
⊔ Yes.	Give specific information about them, inc	cluding whether you aire	eady filed the returns and the tax years	
■ No		usal support, child supp	ort, maintenance, divorce settlement, pro	perty settlement
Exam <sub>l</sub> ■ No	benefits; unpaid loans you made to		nefits, sick pay, vacation pay, workers' co	mpensation, Social Security
	Give specific information			
	sts in insurance policies oles: Health, disability, or life insurance; h	nealth savings account	(HSA); credit, homeowner's, or renter's in	surance
■ Yes.	Name the insurance company of each postulation Company name:	olicy and list its value.	Beneficiary:	Surrender or refund
				value:
	Whole Life - na benefit amount 14, 2014 (\$284. Children's term (\$10,000 benefi	e Insurance Policy - imed insured (\$25,0 t) - issue date Janua 67 cash value); (2) n life insurance ride it amount), (3) selec (\$250,000 benefit	000 nry r	
	amount).	(+=,	Minor Child	\$284.67
If you somed	terest in property that is due you from are the beneficiary of a living trust, expedence has died.  Give specific information		ed nsurance policy, or are currently entitled to	o receive property because
Exam <sub>l</sub> □ No □	s against third parties, whether or not oles: Accidents, employment disputes, in			

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Case number (if known) Document

Debtor 1 **Marcia Ann Rockett** 

> Potential FDCPA Claim Against Fire Recovery - Statutory damaage maximum availabel to Plaintff \$1,000.00, in addition to provable actual damages, attorney's fees and costs. Statute of limitations expires 7/2/2016.

Unknown

34. Other contingent and unliquidated claims of every nature, inclu	ding counterclaims	of the debtor and rights to set off	claims
■ No □ Yes. Describe each claim			
35. Any financial assets you did not already list  ■ No □ Yes. Give specific information			
36. Add the dollar value of all of your entries from Part 4, includin for Part 4. Write that number here			\$584.67
Part 5: Describe Any Business-Related Property You Own or Have an Inter-	est In. List any real esta	ate in Part 1.	
37. Do you own or have any legal or equitable interest in any business-relate  ■ No. Go to Part 6.  □ Yes. Go to line 38.	ed property?		
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. Do you own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
No. Go to Part 7.			
☐ Yes. Go to line 47.			
Part 7: Describe All Property You Own or Have an Interest in That You	ı Did Not List Above		
53. Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership	?		
☐ No ■ Yes. Give specific information			
All other personal property not a over \$100.00 individually.	already listed, nor	ne of which valued at	\$500.00
54. Add the dollar value of all of your entries from Part 7. Write the	at number here		\$500.00
			<b>***</b>
55. Part 1: Total real estate, line 2	\$5,473.00		\$0.00
57. Part 3: Total venicles, line 5	\$3,200.00		
58. Part 4: Total financial assets, line 36	\$584.67		
59. Part 5: Total business-related property, line 45	\$0.00		
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7: Total other property not listed, line 54 +	\$500.00		
62. <b>Total personal property.</b> Add lines 56 through 61	\$9,757.67	Copy personal property total	\$9,757.67
63. Total of all property on Schedule A/B. Add line 55 + line 62			\$9,757.67

page 5

		I A A A HI III.	111 1 11111. 1.7 (1) (1)		
Fill in this infor	mation to identify your	case:			
Debtor 1	Marcia Ann Rock	ett			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this	s is ar
				amended fil	ing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption		
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
2010 Dodge Caliber 121,000 miles Average condition	\$5,473.00		\$2,400.00	735 ILCS 5/12-1001(c)		
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit			
Couch, loveseat, side tables, coffee	\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(b)		
table, beds, dressers, kitchen table - good condition Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit			
Appliances - microwave, washer, dryer	\$200.00		\$200.00	735 ILCS 5/12-1001(b)		
Line from Schedule A/B: 6.2	1		100% of fair market value, up to any applicable statutory limit			
3 television sets, desktop PC computer (old), DVD player - average	\$500.00		\$500.00	735 ILCS 5/12-1001(b)		
condition Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit			
Various articles of wearing apparel for one adult female, and one minor	\$500.00		\$500.00	735 ILCS 5/12-1001(a)		
child Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit			

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Marcia Ann Rockett Case number (if known) Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B State Farm Life Insurance Policy - (1) 735 ILCS 5/12-1001(f) \$250,000,00 \$284.67 Whole Life - named insured (\$25,000 benefit amount) - issue date January 100% of fair market value, up to 14, 2014 (\$284.67 cash value); (2) any applicable statutory limit Children's term life insurance rider (\$10,000 benefit amount), (3) select 20 year term rider (\$250,000 benef Line from Schedule A/B: 31.1 State Farm Life Insurance Policy - (1) 735 ILCS 5/12-1001(h)(3) \$284.67 \$10,000.00 Whole Life - named insured (\$25,000 benefit amount) - issue date January 100% of fair market value, up to 14, 2014 (\$284.67 cash value); (2) any applicable statutory limit Children's term life insurance rider (\$10,000 benefit amount), (3) select 20 year term rider (\$250,000 benef Line from Schedule A/B: 31.1 State Farm Life Insurance Policy - (1) 735 ILCS 5/12-1001(b) \$284.67 \$284.67 Whole Life - named insured (\$25,000 benefit amount) - issue date January 100% of fair market value, up to 14, 2014 (\$284.67 cash value); (2) any applicable statutory limit Children's term life insurance rider (\$10,000 benefit amount), (3) select 20 year term rider (\$250,000 benef Line from Schedule A/B: 31.1 **Potential FDCPA Claim Against Fire** 735 ILCS 5/12-1001(b) \$515.33 Unknown Recovery - Statutory damage maximum availabel to Plaintff 100% of fair market value, up to \$1,000.00, in addition to provable any applicable statutory limit actual damages, attorney's fees and costs. Statute of limitations expires 7/2/2016. Line from Schedule A/B: 33.1 All other personal property not 735 ILCS 5/12-1001(b) \$500.00 \$500.00 already listed, none of which valued at over \$100.00 individually. П 100% of fair market value, up to Line from Schedule A/B: 53.1 any applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Debtor 1  Marcia Ann Rockett First Name Middle Name Last Name  Debtor 2  (Spouse if, filling) First Name Middle Name Last Name  United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  Case number ((if known)  Case number ((if known))  Case number (if known)  Case n	Case	: 10-13424	Doc 1 Filed 04/20/16  Document	Page 17	u 04/20/16 12.2 nf 62	21.00 Desc N	nam
Debtor 2 (Spouse 8, filing)  First Name Middle Name Last Name United States Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS  Case number [if known]  Check if this is an arriended filing  Official Form 106D  Schedule D: Creditors Who Have Claims Secured by Property  12/  Se as complete and accurate as possible. It two married people are filing together, both are equally responsible for supplying correct information. If more is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  Do any creditors have claims secured by your property?  No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  Part 1:  List All Secured Claims  Part 1:  List All Secured Claims  Column A Amount of claim by a creditor has a particular dam, list the other creditor separately by apply.  Column B Amount of claim by a creditor has a particular dam, list the other creditors in Part 2. As possible, list the claims in alphabetical order according to the creditor's name.  Part 3:  Creditor's Name  Column B Amount of claim by a creditor has a particular dam, list the other creditors in Part 2. As possible, list the claims in alphabetical order according to the creditor's name.  Part 3:  Creditor's Name  Column B Amount of claim by any approach in a creditor has a particular dam. List the other creditors in Part 2. As possible, list the claims in alphabetical order according to the creditor's name.  Column B Amount of claim by any approach in a creditor has a particular and the creditor's name.  Column B Amount of claim by any approach in any approa	Fill in this informati	ion to identify you					
Debtor 2 (Spouse 8, filing)  First Name Middle Name Last Name United States Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS  Case number [if known]  Check if this is an arriended filing  Official Form 106D  Schedule D: Creditors Who Have Claims Secured by Property  12/  Se as complete and accurate as possible. It two married people are filing together, both are equally responsible for supplying correct information. If more is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  Do any creditors have claims secured by your property?  No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  Part 1:  List All Secured Claims  Part 1:  List All Secured Claims  Column A Amount of claim by a creditor has a particular dam, list the other creditor separately by apply.  Column B Amount of claim by a creditor has a particular dam, list the other creditors in Part 2. As possible, list the claims in alphabetical order according to the creditor's name.  Part 3:  Creditor's Name  Column B Amount of claim by a creditor has a particular dam, list the other creditors in Part 2. As possible, list the claims in alphabetical order according to the creditor's name.  Part 3:  Creditor's Name  Column B Amount of claim by any approach in a creditor has a particular dam. List the other creditors in Part 2. As possible, list the claims in alphabetical order according to the creditor's name.  Column B Amount of claim by any approach in a creditor has a particular and the creditor's name.  Column B Amount of claim by any approach in any approa	Debtor 1	Marcia Ann Roc	ekett				
United States Bankruptcy Court for the:    NORTHERN DISTRICT OF ILLINOIS	_			Last Name			
United States Bankruptcy Court for the:NORTHERN DISTRICT OF ILLINOIS							
Case number   Check if this is an amended filing	(Spouse if, filing)	First Name	Middle Name	Last Name			
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property  12/  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more seeded, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?  1. Do any creditors have claims secured by your property?  1. Do any creditors have claims secured by your property?  1. Do any creditors have claims secured by your property?  1. Do any creditors have claims secured by your property?  1. Elst All Secured Claims  2. List all secured claims. If a creditor has more than one secured claim, list the creditor's name.  2. List all secured claims. If a creditor has a particular claim, list the other creditor's name.  2. List all secured claims. If a creditor has a particular claim, list the other creditor's name.  2. List all secured claims. If a creditor has a particular claim, list the other creditor's name.  2. List all secured claims. If a creditor has a particular claim, list the other creditor's name.  2. List all secured claims. If a creditor has a particular claim, list the other creditor's name.  2. List all secured claims in alphabetical order according to the creditor's name.  2. List all secured claims.  3. To claim B  Value of collateral that adjusted that apply.  2. To claim B  Value of collateral that sports while claim is: Check all that apply.  3. Statutory lien (such as tax lien, mechanic's lien)  3. Statutory lien (such as tax lien, mechanic's lien)  3. Statutory lien (such as tax lien, mechanic's lien)  3. Statutory lien (such as tax lien, mechanic's lien)  4. Column C  Column B  Value of collateral that sports while claim is: Check all that apply.  4. Anount of claim both and that apply.  4. Anount of claim that apply.  5. Anount of claim that apply and the creditor has apply.  5. A	United States Bankru	uptcy Court for the	NORTHERN DISTRICT OF IL	LINOIS			
Official Form 106D  Schedule D: Creditors Who Have Claims Secured by Property  12/  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  1. List All Secured Claims  2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As possible, list the claims in alphabetical order according to the creditor's name.  2. List all secured claims. If a creditor has more than one secured claim, list the other creditors in Part 2. As possible, list the claims in alphabetical order according to the creditor's name.  2. List all secured claims. If a creditor has a particular daim, list the other creditors in Part 2. As possible, list the claims in alphabetical order according to the creditor's name.  2. List all secured claims. If a creditor has more than one receitor has a particular daim, list the creditor's name.  2. List all secured claims. If a creditor has more than one creditor has a particular daim, list the creditor's name.  2. List all secured claims. If a creditor has more than one creditor has a particular daim, list the creditor's name.  2. List all secured claims. If a creditor has more than one creditor has a particular daim, list the creditor's name.  2. List all secured claims. If a creditor has more than one creditor ha	Case number						
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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.    Yes. Fill in all of the information below.    Part 1: List All Secured Claims						amend	ded filing
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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?    No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.    Yes. Fill in all of the information below.    Part 1: List All Secured Claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one reditor has a particular claim, list the creditor's name.    2. List all secured Claims. If a creditor has more than one secured claim, list the creditor separately much as possible, list the claims in alphabetical order according to the creditor's name.    2. List all secured Claims. If a creditor has more than one secured claim, list the creditor separately much as possible, list the claims in alphabetical order according to the creditor's name.    Describe the property that secures the claim:							
s needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?  No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  Yes. Fill in all of the information below.  Part 1: List All Secured Claims.  2. List all secured claims. If a creditor has more than one secured claim, list the orditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim Do not deduct the value of collateral that supports this claim apportion if any  2.1 Greater Suburban Acceptance Corp  Creditor's Name  Describe the property that secures the claim:  2010 Dodge Caliber 121,000 miles  Average condition  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Opened  1/01/14  Last Active	schedule D	Creditors	Who Have Claims	Secured	by Property	<u>y</u>	12/15
Do any creditors have claims secured by your property?							
Do any creditors have claims secured by your property?   No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.   Yes. Fill in all of the information below.   Column A		ditional Page, fill it	out, number the entries, and attach it	to this form. On	the top of any addition	nal pages, write your na	me and case
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Part 1: List All Secured Claims  2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As possible, list the claims in alphabetical order according to the creditor's name.  2.1 Greater Suburban  Creditor's Name  Describe the property that secures the claim:  Po Box 369 Downers Grove, IL 60515 Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Describe the volue of collateral that supports this claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 1/01/14 Last Active	_ `			r schedules. Yc	ou have nothing else to	report on this form.	
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2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim Do not deduct the value of collateral that supports this claim.  2.1 Greater Suburban Acceptance Corp  Creditor's Name  Describe the property that secures the claim:  Po Box 369 Downers Grove, IL 60515 Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Describe the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  At a greement you made (such as mortgage or secured car loan)  At a greement you made (such as mortgage or secured car loan)  At a greement you made (such as tax lien, mechanic's lien)  At least one of the debtors and another Check if this claim relates to a community debt  Opened 1/01/14 Last Active			below.				
for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As a natural claim Do not deduct the value of collateral by a claim and possible, list the claims in alphabetical order according to the creditor's name.  2.1 Greater Suburban Acceptance Corp  Creditor's Name  Describe the property that secures the claim:  Po Box 369 Downers Grove, IL 60515 Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Acceptance Corp Describe the property that secures the claim: \$10,581.00 \$5,473.00 \$5,10  Unsecured portion if any value of collateral that supports this claim Value of collateral.  Value of collateral that supports this claim Value of collateral that supports the claim supports the claim supports the claim supports the claim s	•				Column A	Column B	Column C
much as possible, list the claims in alphabetical order according to the creditor's name.  Do not deduct the value of collateral.  Creditor's Name  Describe the property that secures the claim:  Po Box 369 Downers Grove, IL 60515 Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Describe the property that secures the claim:  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 1/01/14 Last Active					Amount of claim	Value of collateral	Unsecured
2.1 Greater Suburban Acceptance Corp  Creditor's Name  Describe the property that secures the claim: \$10,581.00 \$5,473.00 \$5,10  PO Box 369 Downers Grove, IL 60515 Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 1/01/14 Last Active					Do not deduct the	that supports this	portion
Acceptance Corp  Creditor's Name  2010 Dodge Caliber 121,000 miles  Average condition  As of the date you file, the claim is: Check all that apply.  Contingent  C	Greater Subi	urban			value of collateral.	Ciaiiii	,
Average condition  As of the date you file, the claim is: Check all that apply.    Contingent   Unliquidated   Disputed	211.	_	Describe the property that secures	the claim:	\$10,581.00	\$5,473.00	\$5,108.00
Po Box 369 Downers Grove, IL 60515    Number, Street, City, State & Zip Code   Unliquidated   Disputed	Creditor's Name			) miles			
Downers Grove, IL 60515   Number, Street, City, State & Zip Code   Unliquidated   Disputed			Average condition				
Downers Grove, IL 60515 Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 1/01/14 Last Active  Contingent Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien) Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Unliquidated Unliq	Po Box 369			: Check all that			
Number, Street, City, State & Zip Code  Unliquidated Disputed  Nature of lien. Check all that apply.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 1/01/14 Last Active	Downers Gro	ove, IL 60515	<u> </u>				
Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 1/01/14 Last Active	Number, Street, City	, State & Zip Code					
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 1/01/14 Last Active			:				
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt  Opened 1/01/14 Last Active	Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Opened 1/01/14 Last Active □ Statutory lien (such as tax lien, mechanic's lien) □ Judgment lien from a lawsuit □ Other (including a right to offset) □ Other (including a right to offset)	Debtor 1 only			mortgage or secu	ured		
□ At least one of the debtors and another □ Check if this claim relates to a community debt  Opened 1/01/14 Last Active	Debtor 2 only		car loan)				
Check if this claim relates to a community debt  Opened 1/01/14 Last Active	Debtor 1 and Debto	r 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
Opened 1/01/14 Last Active	☐ At least one of the d	ebtors and another	☐ Judgment lien from a lawsuit				
1/01/14 Last Active		relates to a	☐ Other (including a right to offset)				
1/01/14 Last Active		Opened					
4464							
Date debt was incurred 2/05/16 Last 4 digits of account number 1101				4404			
	Date debt was incurre	d 2/05/16	Last 4 digits of account nun	1101			

If this is the last page of your form, add the dollar value totals from all pages. \$10,581.00 Write that number here:

## Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

				Document	Page	18 OT 6	72			
Fill	l in this informa	ation to identify your	case:							
De	btor 1	Marcia Ann Rock	ett							
		First Name	Middle	Name	Last Nam	е				
	btor 2 ouse if, filing)	First Name	Middle	Name	Last Nam	e				
l In	ited States Bank	cruptcy Court for the:	NORTHER	RN DISTRICT OF IL	LINOIS					
UII	ileu Siales Daili	druptcy Court for the.	NORTHER	THE DISTRICT OF IL	LINOIS					
	se number							_	Ob a alu ii	f dhin in nu
(11 K	nown								amende	f this is an ed filing
	_	_								
	ficial Form									4045
		F: Creditors W accurate as possible. Us								12/15
Sch Sch left. nam	edule G: Executo edule D: Creditor Attach the Conti ne and case numb	octs or unexpired leases ory Contracts and Unexp s Who Have Claims Sec nuation Page to this pag oer (if known). of Your PRIORITY Un	ired Leases ( ured by Propo je. If you have	Official Form 106G). erty. If more space is e no information to re	Do not incl	ude any cre	ditors with partially s you need, fill it out,	ecured clai number the	ms that ar entries in	e listed in the boxes on the
1.	Do any creditors	s have priority unsecure	d claims agai	nst you?						
	☐ No. Go to Par	t 2.								
	Yes.									
2.	identify what type possible, list the	priority unsecured claims of claim it is. If a claim ha claims in alphabetical orde an one creditor holds a pa	as both priority er according to	and nonpriority amount the creditor's name. It	nts, list that f you have n	claim here a	nd show both priority a	nd nonpriori	ty amounts	s. As much as
	(For an explanati	on of each type of claim, s	see the instruc	tions for this form in th	e instruction	booklet.)	T. (1)	B		N
	_						Total claim	Priority amount		Nonpriority amount
2.1		Collection		Last 4 digits of accou	unt number	9353	\$2,494.00		\$0.00	\$2,494.00
	Priority Cred Harvard (	litor's Name Collection Services	s '	When was the debt in	ncurred?	2006				
		Iston Avenue						-		
	Chicago, Number Stre	et City State Zlp Code		As of the date you file	e. the claim	is: Check a	ill that apply			
		the debt? Check one.		☐ Contingent	,					
	Debtor 1 onl	ly		☐ Unliquidated						
	Debtor 2 onl	ly		Disputed						
	Debtor 1 and	d Debtor 2 only	•	Type of PRIORITY un	secured cl	aim:				
	☐ At least one	of the debtors and another	er	☐ Domestic support of	obligations					
	☐ Check if thi	s claim is for a commur	nity debt	Taxes and certain	other debts	you owe the	government			
		bject to offset?		Claims for death or	r personal in	jury while yo	u were intoxicated			
	■ No			Other. Specify						
	Yes					Of Humai rvices be	n Svcs - overpay nefits	ment of		
Pa	rt 2: List All	of Your NONPRIORIT	Y Unsecure	d Claims						
3.	Do any creditors	s have nonpriority unsec	cured claims	against you?						
	☐ No. You have	nothing to report in this p	art. Submit thi	s form to the court with	n your other	schedules.				
	Yes.									
4.	List all of your nunsecured claim,	nonpriority unsecured class the creditor separately holds a particular claim, li	y for each clair	n. For each claim liste	d, identify w	hat type of c	laim it is. Do not list cla	aims already	included in	n Part 1. If more

Total claim

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Page 19 of 62 Case number (if know) Debtor 1 Marcia Ann Rockett 4.1 \$1,894.00 Amer Fst Fin Last 4 digits of account number 0002 Nonpriority Creditor's Name Opened 2/03/16 Last Active 7330 W. 33rd Stree When was the debt incurred? 2/16/16 Wichita, KS 67205 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Unsecured Other. Specify 4.2 Amer Fst Fin 0001 Last 4 digits of account number \$0.00 Nonpriority Creditor's Name Opened 9/02/15 Last Active 7330 W. 33rd Stree When was the debt incurred? 12/03/15 Wichita, KS 67205 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unsecured ☐ Yes 4.3 **Aurora Health Care** Last 4 digits of account number 4241 \$224.00 Nonpriority Creditor's Name 3301 W Forest Home Avenue When was the debt incurred? 2/8/2016 Milwaukee, WI 53215 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Medical

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Case number (if know)

Debtor 1 Marcia Ann Rockett 4.4 \$2,563.00 Capital One Last 4 digits of account number 8685 Nonpriority Creditor's Name Attn: Bankruptcy Opened 4/01/14 Last Active Po Box 30285 When was the debt incurred? 2/10/16 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.5 **Capital One** Last 4 digits of account number 4864 \$296.00 Nonpriority Creditor's Name Opened 8/01/15 Last Active Po Box 30253 When was the debt incurred? 2/29/16 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other, Specify 4.6 ComEd Last 4 digits of account number 1097 \$1,795.81 Nonpriority Creditor's Name 10/1/2015 3 Lincoln Center When was the debt incurred? Attn: Bkcy Group-Claims Dep't Oakbrook Terrace, IL 60181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans  $\square$  Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Past due utility bill ☐ Yes

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Page 21 of 62 Case number (if know) Debtor 1 Marcia Ann Rockett 4.7 \$36.00 Comenity Bank/Metro Last 4 digits of account number 4496 Nonpriority Creditor's Name Opened 9/01/15 Last Active Po Box 182125 When was the debt incurred? 2/29/16 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account 4.8 Comenitybank/venus Last 4 digits of account number 0393 \$184.00 Nonpriority Creditor's Name Opened 10/01/15 Last Active Po Box 182125 When was the debt incurred? 3/10/16 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.9 Convergent Outsoucing, Inc 4071 \$480.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 9004 When was the debt incurred? Renton, WA 98057 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify 11 Comcast ☐ Yes

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Debtor 1 Marcia Ann Rockett 4.1 \$437.00 Credit One Bank Na 4720 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 1/01/16 Last Active Po Box 98873 When was the debt incurred? 2/24/16 Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify **Credit Card Diversified Consultant** 8985 \$120.00 Last 4 digits of account number Nonpriority Creditor's Name Dci When was the debt incurred? Opened 12/01/15 Po Box 551268 Jacksonville, FL 32255 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney At T ☐ Yes 4.1 \$0.00 **Dvra Billing** JC42 Last 4 digits of account number Nonpriority Creditor's Name Attention: Bankruptcy Department Opened 4/25/13 Last Active Po Box 2549 When was the debt incurred? 7/31/13 Carlsbad, CA 92018 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Installment Sales Contract T Yes

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Case number (if know)

Debtor 1 Marcia Ann Rockett 4.1 \$500.00 Fire Recovery USA, LLC 6017 Last 4 digits of account number 3 Nonpriority Creditor's Name 2271 Lava Ridge Court When was the debt incurred? 03/12/2015 Roseville, CA 95661-3065 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Fire suppression service ☐ Yes 4.1 First Premier Bank 4872 \$581.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 5/01/07 Last Active 3820 N Louise Ave When was the debt incurred? 5/08/09 Sioux Falls, SD 57107 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.1 Ginnys/Swiss Colony Inc **8570** \$86.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 6/01/07 Last Active 1112 7th Ave When was the debt incurred? 8/11/09 Monroe, WI 53566 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

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Debtor 1 Marcia Ann Rockett 4.1 **GLCU** 0302 \$177.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy Opened 12/01/15 Last Active 2525 Green Bay Rd When was the debt incurred? 2/20/16 North Chicago, IL 60064 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Unsecured 4.1 **GLCU** 0804 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 3/01/15 Last Active 2525 Green Bay Rd When was the debt incurred? 7/02/15 North Chicago, IL 60064 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unsecured ☐ Yes 4.1 **Heights Finance Corp** 9400 \$3,810.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 11/01/14 Last Active 7707 Knoxville Ave When was the debt incurred? 5/21/15 Peoria, IL 61615 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Auto repo deficiency T Yes

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Case number (if know) Debtor 1 Marcia Ann Rockett 4.1 **Heights Finance Corp** 3400 \$0.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 2/01/13 Last Active 7707 Knoxville Ave When was the debt incurred? 7/19/13 Peoria, IL 61615 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Household Goods And Other Collateral** ☐ Yes Other. Specify Auto 4.2 Hsbc Bank Usa, Na 4838 \$0.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 2/16/08 Last Active Po Box 2013 5/09/09 When was the debt incurred? Buffalo, NY 14240 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other. Specify 4.2 Midland Credit Management, Inc. 1109 \$1,221.30 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2365 NOrthside Drive, Suite 300 San Diego, CA 92108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Collection for Midland Funding LLC, Other. Specify original creditor T-Mobile ☐ Yes

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Debtor 1 Marcia Ann Rockett 4.2 Midnight Velvet 855O \$195.00 Last 4 digits of account number 2 Nonpriority Creditor's Name Opened 11/01/07 Last Active **Swiss Colony Midnight Velvet** 1112 7th Ave When was the debt incurred? 8/11/09 Monroe, WI 53566 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.2 **Monroe And Main** 8110 \$698.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 3/01/08 Last Active 1112 Seventh Ave. When was the debt incurred? 8/11/09 Monroe, WI 53566 As of the date you file, the claim is: Check all that apply Number Street City State ZIp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.2 PromptMed Urgent Care \$23.57 5669 Last 4 digits of account number Nonpriority Creditor's Name PO Box 15586 When was the debt incurred? 2/6/2016 Loves Park, IL 61132-5586 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Medical

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Case number (if know)

Debtor 1 Marcia Ann Rockett 4.2 \$308.00 **Security Finance** 1197 Last 4 digits of account number 5 Nonpriority Creditor's Name **Centralized Bankruptcy** Opened 10/23/15 Last Active Po Box 1893 When was the debt incurred? 1/02/16 Spartanburg, SC 29304 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Unsecured 4.2 Springleaf Financial S 4817 \$1,524.24 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 6/01/15 Last Active 1828 Grand Ave When was the debt incurred? 2/03/16 Waukegan, IL 60085 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Note Loan Other. Specify 4.2 Subrogation Division I \$0.00 8666 Last 4 digits of account number Nonpriority Creditor's Name 136 S Main St When was the debt incurred? Opened 7/01/13 Spanish Fork, UT 84660 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Scottsdale Insurance** ☐ Yes Other. Specify Company

Debt	or 1 Marcia Ann Rockett	——————————————————————————————————————	Case number (if know)				
4.2 8	Synchrony Bank/Amazon	Last 4 digits of account number	0805	\$374.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 103104 Roswell, GA 30076	When was the debt incurred?	Opened 9/01/15 Last Active 2/24/16				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts				
	Yes	Other. Specify Charge Acc	count				
4.2 9	Synchrony Bank/Walmart  Nonpriority Creditor's Name	Last 4 digits of account number	0470	\$116.00			
	Attn: Bankruptcy Po Box 103104 Roswell, GA 30076	When was the debt incurred?	Opened 9/01/15 Last Active 2/21/16				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	<ul><li>□ Debtor 1 and Debtor 2 only</li><li>□ At least one of the debtors and another</li></ul>	☐ Disputed  Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing					
	□Yes	Other. Specify Charge Acc					
4.3 0	The Skin Care Center	Last 4 digits of account number	3567	\$263.00			
	Nonpriority Creditor's Name 900 N Westmoreland Rd, Suite 222 Lake Forest, IL 60045-1694	When was the debt incurred?	2/11/2016				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	□ Debtor 2 only □ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	d claim:					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?  No	report as priority claims  Debts to pension or profit-sharir	ng plans, and other similar debts				
	— · · · ·	<b>0.</b>					

Part 3: List Others to Be Notified About a Debt That You Already Listed

☐ Yes

■ Other. Specify Medical

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Marcia Ann Rockett

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Name and Address **United Equitable Ins Co** PO Box 1091 Skokie, IL 60076

On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.13 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

5865

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	2,494.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	2,494.00
				T	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	17,906.92
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	17,906.92

Debtor 1 Marcia Ann Rockett First Name Middle Name Last Name  Debtor 2 (Spouse if, filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS
Debtor 2 (Spouse if, filing)  First Name  Middle Name  Last Name  United States Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS
(Spouse if, filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS
Case number
(if known)

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Hebron Townhose Apts
P.O.BOX 789
Libertyville, IL 60048

State what the contract or lease is for

Residential lease arrangement - HUD Housing - annual lease - September 2015- September 2016.

		Docume	nt Page 31 d	nt h2	
Fill in this i	information to identify your				
Debtor 1	Marcia Ann Rock	ett			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	a) First Name	Middle Name	Last Name		
		NORTHERN DISTRICT			
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	er				Charle if this is an
(II KIIOWII)					☐ Check if this is an amended filing
					3
Official	Form 106H				
Schedi	ule H: Your Cod	ebtors			12/15
ill it out, an our name a		boxes on the left. Attach . Answer every question	the Additional Page t	to this page. On the to	needed, copy the Additional Page, p of any Additional Pages, write
■ No □ Yes					
Arizona  No. (	in the last 8 years, have you a, California, Idaho, Louisiana Go to line 3. Did your spouse, former spo	, Nevada, New Mexico, Pu	erto Rico, Texas, Wash		ty states and territories include
in line 2 Form 1 out Col	2 again as a codebtor only i 06D), Schedule E/F (Officia lumn 2.	f that person is a guaran	tor or cosigner. Make	sure you have listed to 16G). Use Schedule D,	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor ame, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
2.4				Oskodala S. F.	
3.1 <sub>N</sub>	lame			_ □ Schedule D, lin □ Schedule E/F.	
				☐ Schedule G, lin	
N	lumber Street			<del>_</del>	
	ity	State	ZIP Code		
3.2				☐ Schedule D, lin	ne
	lame			☐ Schedule E/F,	
				☐ Schedule G, lin	ne
N	lumber Street			_	
С	City	State	ZIP Code		

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EIII	in this information to i	idantify your o	200								
		Marcia Ann									
	otor 2 ouse, if filing)					_					
Uni	ted States Bankruptcy	y Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
	se number nown)						☐ An		d filing ent showin	g postpetition	
0	fficial Form 1	1061					MN	Л / DD/ Y	YYY	-	
S	chedule I: Y	our Inc	ome					, 22, .			12/15
spo atta	use. If you are separch a separate sheet  tt:  Describe I  Fill in your employ	rated and you to this form. Employment	are married and not filing wing the spouse is not filing wing wing the top of any additi	ith you, do not inclu onal pages, write yo	ıde infor	mati	on about y d case nur	your spo nber (if l	ouse. If mo	ore space is answer every	needed,
	information.			Debtor 1						ling spouse	
	If you have more the attach a separate painformation about a	age with	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>				□ Emplo	•		
	employers.		Occupation	CAREGIVER							
	Include part-time, se self-employed work		Employer's name	COMFORTER M	(EEPER	S					
	Occupation may incor homemaker, if it		Employer's address	1040 S. WHEEL WHEELING,, IL	_						
			How long employed to	here? 0 Years	s, 10 Mc	nth	s	_			
Par	t 2: Give Detai	ils About Mor	thly Income								
	mate monthly incomuse unless you are se		ate you file this form. If	you have nothing to r	report for	any	line, write S	\$0 in the	space. Inc	clude your noi	n-filing
	ou or your non-filing spees space, attach a sep		ore than one employer, co	ombine the information	on for all e	empl	oyers for th	nat perso	n on the li	nes below. If	you need
							For Debt	or 1		btor 2 or ng spouse	
2.			ry, and commissions (becalculate what the monthle		2.	\$	8	358.00	\$	N/A	
3.	Estimate and list n	nonthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross In	come. Add lir	ne 2 + line 3.		4.	\$	858	3.00	\$	N/A	

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Copy line 4 here 4. \$858.00  5. List all payroll deductions:  5a. Tax, Medicare, and Social Security deductions 5a. \$84.22 5b. Mandatory contributions for retirement plans 5b. \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$0.00 5f. Domestic support obligations 5f. \$0.00 5g. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. \$0.00 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$44.22 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$773.78  8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include a limony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$0.00 8e. Social Security 8c. \$0.00 8f. Other government assistance that you regularly receive		btor 2 or		
5. List all payroll deductions:  5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. Domestic support obligations 5g. Union dues 5g. Union dues 5g. Union dues 5h. Other deductions. Specify:  6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 84.22  7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  8a. Net income regularly received: 8a. Net income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive lnclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00  8d. Unemployment compensation 8d. Unemployment compensation 8e. Social Security 8e. \$ 1,145.00	11011-1111	ing spouse		
5. List all payroll deductions:  5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. Social Scurity 5d. Domestic support obligations 5f. Domestic support obligations 5f. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. Social Scurity 6. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly retincome.  8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00 8d. Unemployment compensation 8d. \$ 0.00 8d. Unemployment compensation 8d. \$ 0.00	\$	N/A		
5a.Tax, Medicare, and Social Security deductions5a.\$ 84.225b.Mandatory contributions for retirement plans5b.\$ 0.005c.Voluntary contributions for retirement plans5c.\$ 0.005d.Required repayments of retirement fund loans5d.\$ 0.005e.Insurance5e.\$ 0.005f.Domestic support obligations5f.\$ 0.005g.Union dues5g.\$ 0.005h.Other deductions. Specify:5h.+\$ 0.006.Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.6.\$ 44.227.Calculate total monthly take-home pay. Subtract line 6 from line 4.7.\$ 773.788.List all other income regularly received:8a.Net income from rental property and from operating a business, profession, or farm			_	
5b.       Mandatory contributions for retirement plans       5b.       \$ 0.00         5c.       Voluntary contributions for retirement plans       5c.       \$ 0.00         5d.       Required repayments of retirement fund loans       5d.       \$ 0.00         5e.       Insurance       5e.       \$ 0.00         5f.       Domestic support obligations       5f.       \$ 0.00         5g.       Union dues       5g.       \$ 0.00         5h.       Other deductions. Specify:       5h.+       \$ 0.00         6.       Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.       6.       \$ 44.22         7.       Calculate total monthly take-home pay. Subtract line 6 from line 4.       7.       \$ 773.78         8.       List all other income regularly received:       8a.       Net income from rental property and from operating a business, profession, or farm             Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.       8a.       0.00         8b.       Interest and dividends       8b.       0.00         8c.       Family support payments that you, a non-filing spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.       8c.       0.00         8d. <td>\$</td> <td>N/A</td> <td></td>	\$	N/A		
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5d. Required repayments of retirement fund loans       5d. \$ 0.00         5e. Insurance       5e. \$ 0.00         5f. Domestic support obligations       5f. \$ 0.00         5g. Union dues       5g. \$ 0.00         5h. Other deductions. Specify:       5h. \$ 0.00         6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.       6. \$ 84.22         7. Calculate total monthly take-home pay. Subtract line 6 from line 4.       7. \$ 773.78         8. List all other income regularly received:       8a. Net income from rental property and from operating a business, profession, or farm         Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.       8a. \$ 0.00         8b. Interest and dividends       8b. \$ 0.00         8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.       8c. \$ 0.00         8d. Unemployment compensation       8d. \$ 0.00         8e. Social Security       8e. \$ 1,145.00	\$	N/A	_	
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5h. Other deductions. Specify:  5h. Other deductions. Specify:  6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  8. List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00  8d. Unemployment compensation  8e. Social Security	\$	N/A	_	
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8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00  8d. Unemployment compensation  8d. \$ 0.00  8d. Social Security	\$	N/A	<u>.</u>	
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8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00  8d. Unemployment compensation  8d. \$ 0.00  8e. Social Security  8e. \$ 1,145.00	\$	N/A	L	
regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00  8d. Unemployment compensation  8e. Social Security  8e. \$ 1,145.00	\$	N/A	<u> </u>	
8d.         Unemployment compensation         8d.         \$ 0.00           8e.         Social Security         8e.         \$ 1,145.00	\$	N/A		
8e. Social Security 8e. \$ 1,145.00	\$	N/A	_	
<del></del>	\$	N/A		
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: State of Illinois Disability Benefit for minor son 8f. \$ 409.00	\$	N/A	_	
8g. Pension or retirement income 8g. \$ 0.00	\$	N/A	N/A N/A	
8h. Other monthly income. Specify: 8h.+ \$ 0.00	+ \$	N/A		
9. <b>Add all other income.</b> Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$\ \\$ 1,554.00	\$	N/A	A	
10. <b>Calculate monthly income.</b> Add line 7 + line 9.	1	N/A = \$	2,327.78	
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			_,=====================================	
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses list Specify:	ed in <i>Sch</i> e	edule J. 11. +\$	0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly in Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data applies	, if it	12. \$ Combi	2,327.78	
13. Do you expect an increase or decrease within the year after you file this form?  □ No.				

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Esu s	in this information to identify your cose.		Ī		
	in this information to identify your case:				
Debt	Marcia Ann Rockett			k if this is: An amended filing	
Debt	tor 2		_	ū	ving postpetition chapter
(Spo	buse, if filing)			13 expenses as of	the following date:
Unite	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILI	LINOIS	_	MM / DD / YYYY	
Case	e number				
(lf kr	nown)				
Of	fficial Form 106J				
	chedule J: Your Expenses				12/1
Be a info	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to the nber (if known). Answer every question.				
Part 1.	t 1: Describe Your Household Is this a joint case?				
١.	No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expen	ses for Separate House	ehold of Debt	or 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	•		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Son		5	■ Yes
					□ No
					☐ Yes ☐ No
					☐ Yes
					□ No
					☐ Yes
3.	Do your expenses include expenses of people other than				
	yourself and your dependents?				
	t 2: Estimate Your Ongoing Monthly Expenses				
exp	imate your expenses as of your bankruptcy filing date unles senses as of a date after the bankruptcy is filed. If this is a solicable date.				
the	lude expenses paid for with non-cash government assistand value of such assistance and have included it on <i>Schedule</i> ficial Form 106I.)			Your exp	enses
,	,				
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	e. Include first mortgag	e 4. \$		129.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		35.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
5	<ol> <li>Homeowner's association or condominium dues</li> <li>Additional mortgage payments for your residence, such as</li> </ol>	homo oquity laans	4d. \$ 5. \$		0.00
5.	Additional mortuage payments for your residence, SUCN as	HOITIE EQUITY TORNS	ე. ა		U.UU

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lities:  Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: od and housekeeping supplies ildcare and children's education costs othing, laundry, and dry cleaning	6a. 6b. 6c. 6d. 7.	\$	250.00 0.00
Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: od and housekeeping supplies ildcare and children's education costs	6b. 6c. 6d.	\$	
Telephone, cell phone, Internet, satellite, and cable services Other. Specify: od and housekeeping supplies ildcare and children's education costs	6c. 6d.	\$	0.00
Other. Specify: od and housekeeping supplies ildcare and children's education costs	6d.	·	0.00
od and housekeeping supplies ildcare and children's education costs			134.00
ildcare and children's education costs		\$	0.00
ildcare and children's education costs		\$	350.00
	8.	\$	100.00
	9.	\$	50.00
sonal care products and services	10.	·	75.00
dical and dental expenses	11.	\$	150.00
insportation. Include gas, maintenance, bus or train fare.		<u> </u>	130.00
not include car payments.	12.	\$	150.00
tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	25.00
aritable contributions and religious donations	14.	·	100.00
urance.			100.00
not include insurance deducted from your pay or included in lines 4 or 20.			
a. Life insurance	15a.	\$	102.00
o. Health insurance	15b.	\$	0.00
c. Vehicle insurance	15c.	\$	60.00
d. Other insurance. Specify:	15d.	· -	0.00
<b>(es.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.		<u> </u>	0.00
ecify:	16.	\$	0.00
tallment or lease payments:		·	
a. Car payments for Vehicle 1	17a.	\$	294.00
o. Car payments for Vehicle 2	17b.	\$	0.00
c. Other. Specify:	17c.	\$	0.00
I. Other. Specify:	17d.	\$	0.00
ur payments of alimony, maintenance, and support that you did not report as			
ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	· ·	0.00
ner payments you make to support others who do not live with you.		\$	0.00
ecify:	19.		
			2.00
			0.00
		·	0.00
		· -	0.00
			0.00
e. Homeowner's association or condominium dues	20e.	\$	0.00
ner: Specify:	21.	+\$	0.00
culate your monthly expenses			
		\$	2,004.00
a. Add lines 4 through 21.		\$	_,
a. Add lines 4 through 21.			2,004.00
a. Add lines 4 through 21. b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		1 4	2,004.00
a. Add lines 4 through 21. b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 c. Add line 22a and 22b. The result is your monthly expenses.		\$	
a. Add lines 4 through 21. b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 c. Add line 22a and 22b. The result is your monthly expenses.    Culate your monthly net income.		\$	
a. Add lines 4 through 21. b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 c. Add line 22a and 22b. The result is your monthly expenses.    Coulate your monthly net income.     Copy line 12 (your combined monthly income) from Schedule I.	<b>23</b> a.		2,327.78
a. Add lines 4 through 21. b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 c. Add line 22a and 22b. The result is your monthly expenses.    Culate your monthly net income.	23a. 23b.		2,327.78 2,004.00
a. Add lines 4 through 21. b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 c. Add line 22a and 22b. The result is your monthly expenses.    Coulate your monthly net income.     Copy line 12 (your combined monthly income) from Schedule I.			
1	er payments you make to support others who do not live with you.  cify:  er real property expenses not included in lines 4 or 5 of this form or on Sche  Mortgages on other property  Real estate taxes  Property, homeowner's, or renter's insurance  Maintenance, repair, and upkeep expenses  Homeowner's association or condominium dues  er: Specify:  culate your monthly expenses  Add lines 4 through 21.	er payments you make to support others who do not live with you.    19.	er payments you make to support others who do not live with you.    19.

### 24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

ЦΝ	lo.
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■ Yes. Explain here: Expected to have increased medical expenses within the next year as a result of surgery.

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Fill in this in	nformation to identify your	case:					
Debtor 1	Marcia Ann Rock	ett					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name	_			
United States	s Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS				
Case numbe	r						
(if known)					Check if this is an amended filing		
You must file obtaining mo		ile bankruptcy schedu n connection with a ba	les or amended schedul	les. Making a false stat	tement, concealing property, or 00, or imprisonment for up to 20		
	Sign Below						
Did you	u pay or agree to pay some	one who is NOT an att	torney to help you fill οι	ut bankruptcy forms?			
■ No	)						
☐ Ye	es. Name of person				n Bankruptcy Petition Preparer's Notice, ration, and Signature (Official Form 119)		
	enalty of perjury, I declare y are true and correct.	that I have read the su	ummary and schedules f	filed with this declarati	on and		

Signature of Debtor 2

Date

X /s/ Marcia Ann Rockett

Marcia Ann Rockett Signature of Debtor 1

Date April 20, 2016

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Fill in this information to identify yo	our case:			
Debtor 1 Marcia Ann Ro	Middle Name	Last Name		
Debtor 2	Middle Name	Last Name		
(Spouse if, filing) First Name	Middle Name	Last Name		
United States Bankruptcy Court for the	e: NORTHERN DISTRICT C	OF ILLINOIS		
Case number				
(if known)			_	Check if this is an
				amended filing
0/// 1 1 5 10 10 10 10 10 10 10 10 10 10 10 10 10				
Official Form 107				
Statement of Financial	Affairs for Individ	duals Filing for B	Bankruptcy	4/16
Be as complete and accurate as pos				
information. If more space is needer number (if known). Answer every qu		this form. On the top of an	y additional pages, write yo	ur name and case
Part 1: Give Details About Your	Marital Status and Where You	I lived Refore		
		LIVEU BOIOIC		
What is your current marital sta	itus?			
☐ Married				
■ Not married				
2. During the last 3 years, have yo	u lived anywhere other than	where you live now?		
□ No				
	u lived in the last 3 years. Do no	ot include where you live now	٧.	
Debtor 1 Prior Address:	Dates Debtor 1	Debtor 2 Prior Ac		Dates Debtor 2
Debior I Frior Address.	lived there	Debiol 2 Prior Ac	iuress.	lived there
2719 Hebron Ave Apt C	From-To:	☐ Same as Debtor	1	Same as Debtor 1
Zion, IL 60099	8/2013 - 4/201	4		From-To:
3. Within the last 8 years, did you states and territories include Arizona, C  ■ No □ Yes. Make sure you fill out S		vada, New Mexico, Puerto R		
Part 2 Explain the Sources of Yo	our Income			
4. Did you have any income from	omployment or from eneratin	a a business during this w	par or the two provious cale	ander veere?
4. Did you have any income from a Fill in the total amount of income y If you are filing a joint case and you	you received from all jobs and a	all businesses, including part	-time activities.	iliual years?
□ No				
Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income	Gross income	Sources of income	Gross income
	Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
From January 1 of current year unti the date you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$3,483.50	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	

Best Case Bankruptcy

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Debtor 1 Marcia Ann Rockett

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$5,203.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$3,500.00	☐ Wages, commissions, bonuses, tips	
	Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2014)	☐ Wages, commissions, bonuses, tips	\$10,000.00	☐ Wages, commissions, bonuses, tips	
	Operating a business		☐ Operating a business	
<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>	Debtor 1 Sources of income	Gross income from	Debtor 2 Sources of income	Gross income
	Describe below.	each source (before deductions and exclusions)	Describe below.	(before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	SSI Benefits	\$4,620.00		
For last calendar year: (January 1 to December 31, 2015)	Federal Tax Return	\$3,254.00		
	SSI Benefits	\$13,740.00		
For the calendar year before that: (January 1 to December 31, 2014)	SSI Benefits	\$13,620.00		
	Tax Return	\$2,685.00		
Part 3: List Certain Payments You	Made Before You Filed for	Bankruptcv		
	•	umer debts. Consumer debts	are defined in 11 U.S.C. § 10	1(8) as "incurred by an
During the 90 days befo	re you filed for bankruptcy, di	d you pay any creditor a total	of \$6,425* or more?	

□ No. Go to line 7.

□ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Document Page 39 of 62 ase number (if known) Debtor 1 Marcia Ann Rockett Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for ... still owe paid **Greater Suburban Acceptance** 4/3/2016, 3/3/3016, \$882.00 \$10,581.00 ■ Mortgage Corp 2/3/2016 Car Po Box 369 ☐ Credit Card **Downers Grove, IL 60515** ☐ Loan Repayment ☐ Suppliers or vendors Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Insider's Name and Address Reason for this payment Dates of payment Total amount Amount you paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the **Describe the Property** Date property Explain what happened

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Debtor 1 Marcia Ann Rockett

	Creditor Name and Address	De	escribe the Property	Date	Value of the property
		Ex	plain what happened		,
	Heights Finance Corp 7707 Knoxville Ave Peoria, IL 61615	■	Property was repossessed. Property was foreclosed. Property was garnished.	April 2015	\$0.00
			Property was attached, seized or levied.		
	Within 90 days before you filed for bankr accounts or refuse to make a payment be No  Yes. Fill in the details.		did any creditor, including a bank or financial insequence you owed a debt?	titution, set off any a	amounts from your
	Creditor Name and Address	De	escribe the action the creditor took	Date action was taken	Amount
	court-appointed receiver, a custodian, or ■ No □ Yes	anoth	vas any of your property in the possession of an a er official?	assignee for the bend	efit of creditors, a
Par	List Certain Gifts and Contribution	S			
13.	■ No □ Yes. Fill in the details for each gift.	. ,	did you give any gifts with a total value of more th		
	Gifts with a total value of more than \$60 per person  Person to Whom You Gave the Gift and Address:	O	Describe the gifts	Dates you gave the gifts	Value
14.	Within 2 years before you filed for bankro  □ No  • Yes. Fill in the details for each gift or c		did you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed	Dates you contributed	Value
	All Nations Pentecostal House of Prayer 5433 West Madison Street Chicago, IL 60651		\$100 monthly contribution	monthly	\$600.00
Par	t 6: List Certain Losses				
-	Within 1 year before you filed for bankru or gambling?	ptcy o	r since you filed for bankruptcy, did you lose anyt	hing because of the	ft, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and	Descr	ibe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	Includ	e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	loss	lost

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Pai	t 7: List Certain Payments or Transfers			
16.	Within 1 year before you filed for bankruptcy, consulted about seeking bankruptcy or prepar include any attorneys, bankruptcy petition prepared	ring a bankruptcy petition?		
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any prop transferred	erty Date payment or transfer was made	Amount of payment
	Tomei Law 223 N Milwaukee Ave., Ste. 14 Gurnee, IL 60031 robert@tomeilawfirm.com	Attorney Fees	3/16/2016; 4/1/2016, 4/20/2016	\$1,334.00
	CC Advising, Inc. 703 Washington Ave., Ste. 200 Bay City, MI 48708-5732 www.ccadvising.com	Cash	3/17/2016	\$9.76
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li  No Yes. Fill in the details.	or to make payments to your creditor		operty to anyone who
	Person Who Was Paid Address	Description and value of any prop transferred	erty Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers made include gifts and transfers that you have already I  No  Yes. Fill in the details.	iness or financial affairs? e as security (such as the granting of a s		
	Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debraid in exchange	Date transfer was made
	Person's relationship to you		para in oxonango	
19.	Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-protein No   ☐ Yes. Fill in the details.		elf-settled trust or similar dev	ice of which you are a
	Name of trust	Description and value of the proper	erty transferred	Date Transfer was made
				illaue

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Debtor 1 **Marcia Ann Rockett** 

Par	rt 8: List of Certain Financial Accounts, Ins	truments. Safe Deposi	it Boxes, and St	orage Unit	ts	
	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc	, were any financial acrou	ccounts or instruction	uments he	eld in your name, or for y	
	No Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed fo	r bankruptcy, ar	ny safe de	posit box or other depos	sitory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit o  ■ No □ Yes. Fill in the details.	r place other than you	r home within 1	year befo	re you filed for bankrupt	cy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
Pai	rt 9: Identify Property You Hold or Control t	for Someone Else				
23.	Do you hold or control any property that son for someone.	neone else owns? Incl	lude any proper	ty you bor	rowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Value
Pai	rt 10: Give Details About Environmental Info	rmation				
For	the purpose of Part 10, the following definition	ons apply:				
	Environmental law means any federal, state, toxic substances, wastes, or material into th regulations controlling the cleanup of these	e air, land, soil, surfac	e water, ground			
	Site means any location, facility, or property to own, operate, or utilize it, including dispos	•	environmental I	aw, wheth	er you now own, operat	e, or utilize it or used
	Hazardous material means anything an environment, hazardous material, pollutant, contaminant,		as a hazardous	waste, ha	zardous substance, tox	ic substance,
Rep	port all notices, releases, and proceedings that	t you know about, reg	ardless of when	they occu	urred.	
24.	Has any governmental unit notified you that	you may be liable or p	otentially liable	under or i	n violation of an enviror	nmental law?
	■ No □ Yes. Fill in the details.					

Name of site

Address (Number, Street, City, State and

Governmental unit

ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Date of notice

Environmental law, if you

know it

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Debtor 1 Marcia Ann Rockett

25.	Have you notified any governmental unit of	any release of hazardous material?				
	■ No					
	Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environme know it	ental law, if you	Date of notice
26.	Have you been a party in any judicial or adn	ninistrative proceeding under any envir	onm	ental law?	Include settlements	and orders.
	■ No					
	Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Natı	ure of the o	case	Status of the case
Par	11: Give Details About Your Business or	Connections to Any Business				
27.	Within 4 years before you filed for bankrupt	cy, did you own a business or have an	y of t	the following	ng connections to an	y business?
	A sole proprietor or self-employed i	n a trade, profession, or other activity,	eithe	er full-time	or part-time	
	☐ A member of a limited liability comp	any (LLC) or limited liability partnershi	p (Ll	_P)		
	☐ A partner in a partnership					
	☐ An officer, director, or managing ex	ecutive of a corporation				
	☐ An owner of at least 5% of the votin	g or equity securities of a corporation				
	☐ No. None of the above applies. Go to F	Part 12.				
	■ Yes. Check all that apply above and fill	in the details below for each business				
	Business Name	Describe the nature of the business		Employer Identification number Do not include Social Security number or ITIN.		
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed		number or itin.	
	Babysitting	Babysitting for family		EIN:	SSN	
	2714 Hebron Ave., Apt. D Zion, IL 60099	None		From-To	Jan. 2014 - June 2	2015
	,					
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statement to	o any	yone abou	t your business? Incl	ude all financial
	■ No					
	Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				
Par	12: Sign Below					
are t	re read the answers on this <i>Statement of Fin</i> rue and correct. I understand that making a a bankruptcy case can result in fines up to	false statement, concealing property, of	or ob	taining mo	oney or property by fr	
	.S.C. §§ 152, 1341, 1519, and 3571.	,,,	,	,		
	Marcia Ann Rockett					
	rcia Ann Rockett nature of Debtor 1	Signature of Debtor 2				
·	April 20, 2016	Date				
Did	you attach additional pages to Your Stateme	ent of Financial Affairs for Individuals F	iling	for Bankrı	uptcy (Official Form 1	07)?
	n					

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☐ Yes	
Did you pay or agree to pay so	meone who is not an attorney to help you fill out bankruptcy forms?
■ No	
☐ Vas Name of Person	Attach the Rankruntcy Petition Prenarer's Notice Declaration and Signature (Official Form 110)

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Fill in this info	rmation to identify your	case:			
Debtor 1	Marcia Ann Rock	ett			
<b>D</b> 14 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	<del></del>	
United States E	Bankruptcy Court for the:	NORTHERN DIST	TRICT OF ILLINOIS		
Case number					
(if known)				☐ Check if this is an amended filing	
Official Fo	orm 108				
Stateme	ent of Intentio	n for Indiv	iduals Filing Under C	<b>hapter 7</b> 12/15	
If you are an in	dividual filing under abor	otor 7 vou must fil	Laut thin farm if:	•	
_	dividual filing under chap	-	rout this form ii.		
	ased personal property a				
which				the date set for the meeting of creditors, opies to the creditors and lessors you list	
	people are filing together and date the form.	in a joint case, bo	th are equally responsible for supplying	correct information. Both debtors must	
	e and accurate as possib your name and case nun		needed, attach a separate sheet to this	form. On the top of any additional pages,	
Part 1: List	Your Creditors Who Have	Secured Claims			
			: Creditors Who Have Claims Secured b	y Property (Official Form 106D), fill in the	_
information I Identify the o	below. creditor and the property tl	nat is collateral	What do you intend to do with the pro		
			secures a debt?	as exempt on Schedule C	?
			_	_	
	Greater Suburban Acc	ceptance	<ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul>	□ No	
namo.	ос. р		_	■ Yes	
Description of	of 2010 Dodge Calibe	er 121,000	Retain the property and enter into a Reaffirmation Agreement.		
property	miles Average condition		Retain the property and [explain]:		
securing deb	ot: 71101ago comanion		Keep & Pay		
	Your Unexpired Persona				
in the informati	ion below. Do not list rea	I estate leases. Un		d Unexpired Leases (Official Form 106G), find effect; the lease period has not yet ended in § 365(p)(2).	
Describe your	unexpired personal prop	perty leases		Will the lease be assumed?	
Lessor's name:	· · ·			□ No	
Description of I					
Property:				☐ Yes	
Lessor's name:				□ No	
Description of le Property:	eased			☐ Yes	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debto	Marcia Ann Rockett	Case number (if known)
	r's name:	□ No
Descr Prope	iption of leased rty:	☐ Yes
	or's name:	□ No
Descr Prope	iption of leased orty:	☐ Yes
	or's name: iption of leased	□ No
Prope		☐ Yes
	or's name: iption of leased	□ No
Prope		☐ Yes
	or's name:	□ No
Prope	iption of leased rty:	☐ Yes
Part 3	Sign Below	
	penalty of perjury, I declare that I have indicated my intention about ty that is subject to an unexpired lease.	ut any property of my estate that secures a debt and any personal
· _	s/ Marcia Ann Rockett X	
	Marcia Ann Rockett Signature of Debtor 1	Signature of Debtor 2
[	Date April 20, 2016	ate

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-13424 Doc 1 Filed 04/20/16 Entered 04/20/16 12:21:00 Desc Main Document Page 51 of 62

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

In r	e Marcia Ann Rockett		Case No.				
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPE	NSATION OF ATTORN	EY FOR DE	EBTOR(S)			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	1,334.00			
	Prior to the filing of this statement I have received		\$	1,334.00			
	Balance Due		\$	0.00			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person un	less they are mem	bers and associates of my law firm.			
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.						
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.</li> </ul>						
6.	<ol> <li>By agreement with the debtor(s), the above-disclosed fee does not include the following service:</li> <li>Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.</li> </ol>						
		CERTIFICATION					
this	I certify that the foregoing is a complete statement of an bankruptcy proceeding.	y agreement or arrangement for pa	yment to me for re	epresentation of the debtor(s) in			
	April 20, 2016	/s/ Robert Tomei					
Date		Robert Tomei 63103 Signature of Attorney	339				
		Tomei Law					
		223 N Milwaukee Av Gurnee, IL 60031	/e., Ste. 14				
		847-596-7494 Fax:					
		robert@tomeilawfir  Name of law firm	m.com				
		ivance of iaw firm					



223 N Riverside Dr. (Rt. 21), Suite 14 Gurnee, Illinois 60031 Telephone: 847.596.7494; FAX: 847.589.2263

### **Bankruptcy Retainer Agreement**

# OUR LAW FIRM IS A DEBT RELIEF AGENCY. WE HELP PEOPLE FILE FOR BANKRUPTCY RELIEF UNDER THE BANKRUPTCY CODE.

In consideration for services to be rendered to the undersigned ("Client") by Robert J. Tomei Jr. ("Attorney") in connection with the representation of Client regarding bankruptcy matters, Client, agrees as follows:

- 1. Client understands that there are essentially four (4) Chapters of the Bankruptcy Code under which Client may seek relief:
  - a. Chapter 7 Liquidation (Individuals and Corporations)
  - b. Chapter 11 Protection and reorganization for Individuals and Business Corporations
  - c. Chapter 12 Family Farm or Fishermen
  - d. Chapter 13 Wage Earners Plan
- U.S. bankruptcy laws require that your financial information be subjected to a "Means Test" to determine your eligibility to file a bankruptcy case. Attorney cannot assure you in advance of the outcome of this Means Test, as it requires a complete review of your financial records and potential challenges from the U.S. Trustee.
- 2. Client understands that Client will be charged and agrees to pay all fees and costs in connection with Attorney's representation of the Client regarding the Client's bankruptcy matters prior to the filing of Client's case, with at a minimum, half due upon the retention of attorney's services, including without limitation, attorney's fees and court costs, as set forth below. In the event client does not pay for attorney's services in full upon retention, Client shall be under a continued obligation to make monthly payments towards Client's installment account in an amount agreed upon between Attorney and Client, but at no less than \$100.00 per month.
  - A. For those clients passing the Means Test (and for those where the Means Test is inapplicable):
    - Streamlined Chapter 7 Individual with only consumer debt, Client pays in full upon retention of Attorney's services, Client passes the Means Test without having to complete official Bankruptcy Form 122A-2, Client has less than 25 total creditors/notice recipients, Client is either unemployed, or a W-2 employee (no self-employment), after client takes all allowable statutory exemptions, there are no assets left to administer on behalf of client's creditors (i.e., a "no-asset" case), and Client completes an on-line questionnaire (no exceptions):

      Minimum Fee: \$999.00 (attorney fee) + \$335 (filing fee) = \$1,334.00.
    - Standard Chapter 7 Individual with only consumer debt:
       Minimum Fee: \$1,250.00 (attorney fee) + \$335 (filing fee) = \$1,585.00.
    - Chapter 7 Joint Bankruptcy with only consumer debt:

Minimum Fee: \$1,450 (attorney fee) + \$335 (filing fee) = \$1,785.00.

- Chapter 7 Individuals with business debts or over 50 creditors or Corporations:
   Minimum Fee: \$1,750.00 (attorney fee) + \$335.00 Filing fee = \$2,085.00.
- Chapter 7 Joint Bankruptcy with business debts or over 50 creditors or Corporations:
   Minimum Fee: \$1,950.00 (attorney fee) + \$335.00 Filing fee = \$2,285.00.
- Chapter 11 Small Business (9 or less employees or under 25 creditors) Minimum Fee: \$5,000.00 (attorney fee) + \$1,717 filing fee + \$175.00 per hour over 25 hours = \$6,717.00.
- Chapter 11 Large Business (10 or more employees) Minimum Fee: \$8,000.00 (attorney fee) + \$1,717.00 filing fee + \$175.00 per hour over 75 hours = \$9,717.00.
- Chapter 13 Wage Earner's Plan Minimum Fee: \$3,000.00 (attorney fee) + \$310.00 filing fee = \$3,310.00. (Fee negotiated upward if business assets are involved.)

### Additional Fees may apply in the event that:

- O Client(s) requires the filing of an emergency petition (\$100.00);
- o Client(s) has more than 50 total creditors (\$100.00); and/or
- Client(s) either desires or requires Attorney to procure his/her credit reports from a third party provider (\$30.00 individual filings/\$50.00 for joint filers); and/or
- Client(s) owns a business. For each business association, there will be another \$375.00 charge).
- B. Filing Fee Waiver Request: Should a filing fee waiver be requested and the filing fee not be included in the initial payment, and said request be denied by the court, Client acknowledges that s/he will be ordered to make installment payments according to the payment schedule provided by the court and that any prior down payment will not include filing fees.
- C. Filing Fee Installment Payment Request: Client acknowledges that it is his/her responsibility to make the installment payments to the Clerk of the Bankruptcy Court. Client understands that should the Clerk not receive installment payments according to the schedule provided for in the Form 3A Filing Fee Installment Request Order, Client's case may be dismissed.

Client acknowledges that filing fee installment payments must be rendered according to the following guidelines: (1) Made via cashier's check, certified check, or money order. The Bankruptcy Clerk **DOES NOT** accept *personal checks*; (2) In 4 (four) equal amounts of \$83.75 according to the Form 3A Installment Filing Fee request Order, or a balance payoff should Client choose; (3) Made Payable to "Clerk, U.S. Bankruptcy Court", with Client's Bankruptcy case number in the memo line; (4) Sent Certified USPS to the US Bankruptcy Court, Eastern Division, 219 S. Dearborn, Chicago, IL 60604;

- D. Filing Fee Increases: Client understands and acknowledges that, from time to time, the United States Bankruptcy Court may periodically increase the filing fee(s) in connection with a bankruptcy filing under each Chapter. Client further understands and acknowledges that, should any such increase take place subsequent to entering into this Agreement and directly affect the Chapter that Client has retained Attorney's services for, Client is responsible for paying the difference of the increase to Attorney upon demand.
- E. A retainer of \$300, was paid on 3/14/2014. A retainer is an advance payment for Attorney services and the expenses Attorney may incur on Clients behalf and does not cover the court filing fee. Client understands that such amount will be credited against any amount Client owes Attorney and will not be refunded regardless if Client decides to cancel filing of the bankruptcy petition or not.

As explicitly discussed before entering into this arrangement, Attorney has determined that Client's interests in this matter and the nature of the matter in which Attorney has been retained are best served by the 'advance payment retainer' and so Attorney requires such payment in this engagement.

The retainer fee will **not** be held in a separate trust account, and becomes the property of Attorney, upon payment. As an alternative to the advanced payment retainer, the client could place money in a security retainer (i.e., escrow account) with the attorney to secure payment of fees in the future. This is a client choice if desired. The client is advised that the attorney could not represent client in this case without an 'advanced payment retainer' however, as the 'advanced payment retainer' is necessary to mitigate attorneys' exposure to risk in this matter. Therefore, Attorney has selected this method because he feels it is better suited to the client's ability to pay for services rendered, which is the primary reason it is being used in this case.

Client acknowledges that an 'advanced payment retainer' is recognized and approved under Illinois law as a present payment by you to Attorney, in exchange for Attorney's commitment to provide legal services to Client. As discussed above, ownership of this sum passes to Attorney immediately upon receipt of Client's advance payment retainer, and therefore the funds will not be held in a client trust account.

- F. Client understands that if any check given in payment to Attorney is returned for insufficient funds, Client agrees to immediately pay Attorney a \$40.00 fee in addition to the amount of the returned check. This payment and any future payments must therefore be made in cash, money order or debit card.
- G. In the event that Attorney is instructed or otherwise required to perform additional services in addition to those set forth in Paragraph 5 below, the following hourly rates shall apply: Robert J. Tomei Jr., \$225.00. This hourly rate shall be billed out in 1/10 per hour increments, or every 6 minutes.
- Attorney reserves the right to withdraw from Client representation if, among other things, Client fails to honor the terms of this Agreement, including non-payment of attorney and court filing fees; Client fails to cooperate or follow advice on a material matter, or if any fact or circumstance arises or is discovered that would render continuing representation unlawful or unethical. Client is aware of an ethical requirement imposed upon all attorneys in this state. If a Client, in the course of representation by an attorney, perpetrates a fraud upon any person or tribunal, the attorney is obligated to call upon the Client to rectify the same. If the Client refuses or is unable to do so, the attorney is required to reveal the fraud to the affected person or tribunal. Attorney may also terminate representation with Client(s)'s consent, or for cause, including: Client(s)'s failure to pay fees when due; Client(s) is in breach of this Contract; Client(s) is unresponsive or uncooperative; or circumstances would render Attorney's continuing representation unlawful or unethical. Client acknowledges that once the bankruptcy case is filed, Attorney's representation of Client(s) continues through the time Client(s) receives a discharge (except regarding violations of the permanent injunction as provided for in 11 USC § 524), the case is dismissed, the case is converted, or the Bankruptcy Court approves Attorney's withdrawal from representation. Client(s) may terminate Attorney's representation at any time.
- 4. Client(s) agrees to: Discuss with Attorney the Client(s)'s objectives in filing the case; Provide Attorney with full, accurate and timely information, financial or otherwise, including properly documented proof of income and two (2) years of tax returns; Cooperate with Attorney in preparing all required bankruptcy papers and documents, thoroughly reviewing drafts of documents, and promptly advising Attorney of corrections or additions needed; Timely provide Attorney with any additional documents requested by the bankruptcy trustee or other parties in interest; Notify Attorney of any change in address or telephone number; Appear punctually at the meeting of creditors with a picture identification card and proof of social security number; Comply with all orders of the Bankruptcy Court; and Complete the required instructional course in personal financial management. Failure of Client(s) to cooperate fully with Attorney or comply with any request of the bankruptcy trustee or court order may result in Attorney filing a motion with the Bankruptcy Court to withdraw from representation of Client(s).

- 5. Since the outcome of negotiations and litigation is subject to factors which cannot always be foreseen, Client acknowledges and understands that Attorney has made no promises or guarantees to Client concerning the outcome and is unable do so. Nothing in this Bankruptcy Retainer Agreement shall be construed as such a promise or guarantee.
- 6. Client agrees that Attorney may discard Client records within seven (7) years of the completion of the Client's bankruptcy case.
  - 7. Attorney shall provide Client with the following services:
    - a. Review and analyze Clients financial circumstances based on information provided by Client.
    - b. If possible and to the extent possible, based on the information provided by Client, advise Client of the Client's options, including but not limited to bankruptcy options.
    - c. Inform Client what information Client needs to provide Attorney in order to allow Attorney to provide appropriate advice and option information, in the event such information Client provided is insufficient.
    - d. Advise Client of the appropriate requirements in connection with the filing of a bankruptcy case, including the duties of Client connected with such filing.
    - e. Quote the Client an estimated fee, to the extent possible given the information provided by Client, for the attorney's service relative to providing bankruptcy assistance or other legal services to Client.
    - f. Assuming that a U.S. Bankruptcy proceeding is filed, attorney services will include all typical attorney required participation in such proceeding, including but not limited to, appearances at Court hearings, preparation of legal memoranda, and communication with opposing counsel and parties.
    - g. If Client's proceeding requires additional, but not customary work, Attorney will inform Client directly, and enter into a separate written contract for such services to fully apprise Client of the fees, payment requirements, and expected services to be provided.
  - 8. Client acknowledges his/her obligation to make full and complete disclosure of all assets and all liabilities, and to provide all documents and information requested by the attorney, before the bankruptcy petition can be prepared and filed with the court.
  - 9. Client acknowledges that he/she must attend pre-petition credit counseling before the bankruptcy petition can be filed. Client understands that he/she must also attend post-petition counseling after the bankruptcy petition is filed and within the time frame allowed by statute. Client acknowledges that the bankruptcy cannot be filed without the certificate of completion of the pre-bankruptcy credit counseling. Client understands that no discharge of debts will be issued if the post-bankruptcy credit counseling is not completed within the statutory time frame. Fees for all counseling services are the responsibility of the Client and are NOT INCLUDED in the retainer fee.
  - 10. Client acknowledges that Attorney does not represent Client in any other type of case, lawsuit or proceeding other than Client's bankruptcy case. The attorney may make a special appearance in a court, other than the Bankruptcy Court, for the purpose of filing a notification of Client's bankruptcy proceedings, and to suggest to another court that Client's proceedings should be stayed. Sending or receiving any summons or complaint, or notifying the attorney of a pending lawsuit does not obligate Attorney to represent Client in that lawsuit or before that court. Any representation of Client in a state court proceeding, including without limitation: collection lawsuits, foreclosure lawsuits, and etc., is not included in this Bankruptcy Retainer Agreement. Any referral made to another attorney to represent Client is a courtesy only. The attorney is not associated with any other attorney outside of the undersigned attorney's law offices.
    - 11. Client acknowledges that Attorney will not research creditor information, including

addresses, account numbers, or balances. The Client must provide this information to Attorney in writing. Failure to do so may result in unscheduled debts subject to non-dischargeability. Additionally, Client shall incur an additional fee of \$30.00 to the court, as well as additional fees to Attorney for additional services in connection with filing of amendments to Creditor lists as a result of Client's failure to provide sufficient creditor information prior to filing.

- 12. Client agrees that the following matters are not included within the scope of this Bankruptcy Retainer Agreement. Client agrees that, as to the matters listed below, Attorney will not take any action on Client's behalf, without a written request and/or a separate Retainer Agreement and possibly an additional retainer:
  - a. Motions to revoke a discharge.
  - b. Removal of a pending action in another court.
  - c. Obtaining title reports.
  - d. The determination of real estate or tax liens.
  - e. Appeals to the BAP, District Court of Court of Appeals.
  - f. Correcting credit reports.
  - g. Obtaining credit reports.
  - h. Negotiations with Check Systems regarding Client.
  - i. Motions to Dismiss Client's bankruptcy case filed by the Trustee, U.S. Trustee, or any creditor.
  - Any adversary proceeding filed by the Trustee, U.S. Trustee, or any other party on any basis, including, without limitations, proceedings to determine dischargeability of debts.
  - k. Preparing reaffirmation agreements, negotiating the terms of reaffirmation agreements proposed by creditors, motions to redeem personal property, and negotiating reaffirmation agreements when Client's income is not sufficient to rebut the presumption of undue hardship and special circumstances do not warrant the signing of a reaffirmation agreement.
  - Motion to impose or extend the bankruptcy stay.
  - 13. Client understands that certain debts cannot be discharged in bankruptcy. Client agrees that Client is still liable to repay any debt not discharged in Client's bankruptcy. Client understands that the debts listed below are common examples of the types of debts that cannot be discharged in bankruptcy. Client further understands that the list of non-dischargeable debts may be expanded by legislation or court decisions and Attorney has no control over the type of debts that may be or become non-dischargeable.
    - a. Certain types of taxes, custom duties, or debts to pay taxes or custom duties.
    - b. Student loans.
    - c. Debts owed for spousal or child support.
    - d. Debts owed to the spouse, former spouse, or child in a domestic relations proceeding.
    - e. Debts arising from a previous bankruptcy wherein discharge of that particular debt was waived.
    - f. Debts owed for money, property, services, extension-or-removal, or refinancing of credit, if obtained by false pretenses, or false representations, or actual fraud.
    - g. Consumer debts for luxury goods obtained within ninety (90) days of the date of filing of the bankruptcy petition.
    - h. Cash advances obtained within seventy (70) days of the date of the filing of the bankruptcy petition.
    - Debts owed for fraud or defalcation while acting in a fiduciary capacity, or embezzlement or larceny.
    - j. Debts owed for fines, penalties, or forfeitures payable to and for the benefit of governmental entity.
    - k. Debts owed for death or personal injury arising from the operation of a motor vehicle, boat,

or aircraft while intoxicated by drugs or alcohol.

- Client understands that filing bankruptcy does not automatically discharge or remove liens from any real estate, nor does it automatically discharge or remove any liens from personal property such as automobiles. Client agrees that Attorney will not take any action to avoid (remove) any lien on real estate or personal property unless Client specifically authorizes Attorney to do so in writing. Client agrees that Attorney will rely on Client's statements concerning ownership of real property and any liens attached to Client's real property. Client agrees that no real estate title search will be conducted. Client agrees that Attorney will not conduct a public records search for lawsuits filed against Client or judgments granted against Client. Client must separately order and pay for a real estate title search, or public records search for lawsuits or judgments, if Client wishes to obtain one. Additionally, Client agrees and acknowledges that should Client wish to retain property secured by a lien of any kind, Client must continue making voluntary payments to the Creditor holding such lien through whatever means available to the Client, up to and including sending payment to the creditor in the form of check or money order via US Mail. Client agrees to hold Attorney harmless if client later discovers liens, lawsuits or judgments against Client or against Clients property.
- 15. Client understands that individuals who file for relief under the U.S. bankruptcy laws are subject to audits by the U.S. Trustee. If Client's case is selected for an audit, Client agrees to pay Attorney the customary hourly rate for representing Client in such audit.
- 16. Client understands that Attorney may charge additional fees if Client waits longer than ninety (90) days from the first date Attorney is retained to finalize the bankruptcy petition and schedules due to additional due diligence and other update work required to finalize the bankruptcy.
- 18. Client authorizes Attorney to share Client's collection letters, and other debt related materials, including, but not limited to credit reports and telephone records, with outside counsel, at no additional cost to Client, for purposes of ascertaining whether Client has any viable claims under the Fair Debt Collection Practices Act.
- 17. Client acknowledges that Client has read and understands all the terms contains in this Bankruptcy Retainer Agreement and that, whether written, spoken, recorded or transcribed by any other means, no other terms are made part of this Bankruptcy Retainer Agreement. Client is in agreement with the terms of this agreement and has signed on the signature lines below. Client further acknowledges that Client has received a copy of this Bankruptcy Retainer Agreement.

Dated: 3 16 16

Marcia Roc

Client Signature

Client Spouse Signature

Client Spouse Printed Name

Kobert J. Tomer Jr.

#### **United States Bankruptcy Court** Northern District of Illinois

In re	Marcia Ann Rockett		Case No.			
		Debtor(s)	Chapter	7		
	VERIFICATION OF CREDITOR MATRIX					
		Number of C	Creditors:	33		
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditor	ors is true and	correct to the best of my		
Date:	April 20, 2016	/s/ Marcia Ann Rockett  Marcia Ann Rockett  Signature of Debtor				

Amer Fst Fin 7330 W. 33rd Stree Wichita, KS 67205

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Aurora Health Care 3301 W Forest Home Avenue Milwaukee, WI 53215

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Po Box 30253 Salt Lake City, UT 84130

ComEd 3 Lincoln Center Attn: Bkcy Group-Claims Dep't Oakbrook Terrace, IL 60181

Comenity Bank/Metro Po Box 182125 Columbus, OH 43218

Comenitybank/venus Po Box 182125 Columbus, OH 43218

Convergent Outsoucing, Inc Po Box 9004 Renton, WA 98057

Credit One Bank Na Po Box 98873 Las Vegas, NV 89193 Diversified Consultant Dci Po Box 551268 Jacksonville, FL 32255

Dvra Billing Attention: Bankruptcy Department Po Box 2549 Carlsbad, CA 92018

Fire Recovery USA, LLC 2271 Lava Ridge Court Roseville, CA 95661-3065

First Premier Bank 3820 N Louise Ave Sioux Falls, SD 57107

Ginnys/Swiss Colony Inc 1112 7th Ave Monroe, WI 53566

GLCU Attn: Bankruptcy 2525 Green Bay Rd North Chicago, IL 60064

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Greater Suburban Acceptance Corp Po Box 369 Downers Grove, IL 60515

Harvard Collection Harvard Collection Services 4839 N Elston Avenue Chicago, IL 60630

Heights Finance Corp 7707 Knoxville Ave Peoria, IL 61615 Heights Finance Corp 7707 Knoxville Ave Peoria, IL 61615

Hsbc Bank Usa, Na Po Box 2013 Buffalo, NY 14240

Midland Credit Management, Inc. 2365 NOrthside Drive, Suite 300 San Diego, CA 92108

Midnight Velvet Swiss Colony Midnight Velvet 1112 7th Ave Monroe, WI 53566

Monroe And Main 1112 Seventh Ave. Monroe, WI 53566

PromptMed Urgent Care PO Box 15586 Loves Park, IL 61132-5586

Security Finance Centralized Bankruptcy Po Box 1893 Spartanburg, SC 29304

Springleaf Financial S 1828 Grand Ave Waukegan, IL 60085

Subrogation Division I 136 S Main St Spanish Fork, UT 84660

Synchrony Bank/Amazon Attn: Bankruptcy Po Box 103104 Roswell, GA 30076

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Synchrony Bank/Walmart Attn: Bankruptcy Po Box 103104 Roswell, GA 30076

The Skin Care Center 900 N Westmoreland Rd, Suite 222 Lake Forest, IL 60045-1694

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